Case 04-19990 Doc 1 Filed 05/21/04 Entered 05/21/04 14:50:18 **Desc 2-Petition** Page 1 of 30 (Official Form 1) (9/01) FORM B1 **United States Bankruptcy Court** Voluntary Petition Northern District of Illinois Name of Joint Debtor (Spouse) (Last, First, Middle): Name of Debtor (if individual, enter Last, First, Middle): Sanders, Elnora All Other Names used by the Joint Debtor in the last 6 years All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): (include married, maiden, and trade names): Soc. Sec./Tax I.D. No. (if more than one, state all): Soc. Sec./Tax I.D. No. (if more than one, state all): 8-8031 Street Address of Joint Debtor (No. & Street, City, State & Zip Code): Street Address of Debtor (No. & Street, City, State & Zip Code): 14315 Pennsylvania Avenue, #12 Dolton, IL 60419 County of Residence or of the County of Residence or of the Cook Principal Place of Business: Principal Place of Business: Mailing Address of Joint Debtor (if different from street address): Mailing Address of Debtor (if different from street address): Chapter 13W/Plan Location of Principal Assets of Business Debtor (if different from street address above): Information Regarding the Debtor (Check the Applicable Boxes) Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Chapter or Section of Bankruptcy Code Under Which Type of Debtor (Check all boxes that apply) the Petition is Filed (Check one box) ☐ Railroad Individual(s) ☐ Chapter 11 Chapter 13 ☐ Stockbroker ☐ Chapter 7 ☐ Corporation ☐ Chapter 12 ☐ Chapter 9 Partnership ☐ Commodity Broker ☐ Sec. 304 - Case ancillary to foreign proceeding ☐ Other Filing Fee (Check one box) Nature of Debts (Check one box) Full Filing Fee attached ■ Business Consumer/Non-Business Filing Fee to be paid in installments (Applicable to individuals only.) Chapter 11 Small Business (Check all boxes that apply) Must attach signed application for the court's consideration ☐ Debtor is a small business as defined in 11 U.S.C. § 101 certifying that the debtor is unable to pay fee except in installments. ☐ Debtor is and elects to be considered a small business under Rule 1006(b). See Official Form No. 3. 11 U.S.C. § 1121(e) (Optional) U.S. Bankruptcy Court Statistical/Administrative Information (Estimates only) ■ Debtor estimates that funds will be available for distribution to unsecured creditors. Northern District Of Illinois Debtor estimates that, after any exempt property is excluded and administrative exp Filed: 05/21/2004 will be no funds available for distribution to unsecured creditors. Time: 14:52:46 Debtor: ELNORA SANDERS Estimated Number of Creditors 100-199 200-999 1-15 16-49 50-99

#### Estimated Assets \$1,000,001 to \$10,000,001 to \$500,001 to \$100,001 to \$0 to \$50,001 to \$500,000 \$1 million \$10 million \$50 million \$50,000 \$100,000 Estimated Debts \$10,000,001 to \$50,000,00 \$1,000,001 to \$500.001 to \$50,001 to \$100,001 to \$0 to \$50 million \$100 millio \$500,000 \$1 million \$10 million \$100,000 \$50,000

Case: 04-19990

Chapter: 13 Rec. # \$50,000.04 Judge: Susan Pierson Sonderby \$100 mill 341 mtg: 06/24/2004 @ 03:00PM

07/15/2004 @ 10:30AM ConfHrg:

Trustee: TOM VAUGHN



04BK19990-BK001

| (Official F 6 6 3 9 ( 9 41) 1999 Doc 1 Filed 05/21/04 E   | Entered 05/21/04 14:50:18  | Desc 2-Petition   |
|---|--|---|
| Voluntary Petition (This page must be completed and filed in every case)  | துவின்பே Debtor(s):<br>Sanders, Elnora   | FORM B1, Page 2   |
| Prior Bankruptcy Case Filed Within Last 6   | Years (If more than one, attach addit  | tional sheet)   |
| Location Where Filed: - None -  | Case Number:   | Date Filed:   |
| Pending Bankruptcy Case Filed by any Spouse, Partner, or  | Affiliate of this Debtor (If more than   | one, attach additional sheet)   |
| Name of Debtor: - None -  | Case Number:   | Date Filed:   |
| District:   | Relationship:  | Judge:  |
| Sign  | atures   |   |
| Signature(s) of Debtor(s) (Individual/Joint)  I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand                     | Ex<br>(To be completed if debtor is require  | •   |
| the relief available under each such chapter, and choose to proceed under chapter 7.  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X Signature of Debtor Elnora Sanders  X Signature of Joint Debtor   | (To be completed it  | nat [he or she] may proceed under inited States Code, and have each such chapter. |
|   |  |   |
| Telephone Number (If not represented by attorney)  Date  Signature of Attorney  X Ochrof. Lumi  | Does the debtor own or have posses alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached No             | and identifiable harm to public and made a part of this petition.                 |
| Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)   | Signature of Non-Att I certify that I am a bankruptcy petiti § 110, that I prepared this document provided the debtor with a copy of the | for compensation, and that I have   |
| MGM Law Offices, LLC Firm Name 180 N. LaSalle   | Printed Name of Bankruptcy Pe  | tition Preparer   |
| Suite 3014 <u>Chicago, IL 60601</u> Address 866-795-1903 Fax: 312-795-1974  | Social Security Number   |   |
| Telephone Number  | Address  |   |
| Date  | Names and Social Security num prepared or assisted in preparing  | bers of all other individuals who this document:                                  |
| Signature of Debtor (Corporation/Partnership)  I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X  Signature of Authorized Individual | If more than one person prepare sheets conforming to the approp  X  Signature of Bankruptcy Petition                                     | d this document, attach additional riate official form for each person.  Preparer |
| Printed Name of Authorized Individual   | Date   |   |
| Title of Authorized Individual  | A bankruptcy petition preparer's provisions of title 11 and the Fed Procedure may result in fines or                                     | deral Rules of Bankruptcy   |
| Date  | U.S.C. § 110; 18 U.S.C. § 156.   |   |

# Case 04-19990 Doc 1 Filed 05/21/04 Entered 05/21/04 14:50:18 Desc 2-Petition Page 3 of 30

## United States Bankruptcy Court Northern District of Illinois

| In re | Elnora Sanders |        | Case No. |    |
|-------|----------------|--------|----------|----|
| -     |                | Debtor |          |    |
|       |                |        | Chapter  | 13 |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

|   |                      |                  | AM                | OUNTS SCHEDULED |          |
|---|----------------------|------------------|-------------------|-----------------|----------|
| NAME OF SCHEDULE                                      | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES     | OTHER    |
| A - Real Property                                     | Yes                  | 1                | 85,000.00         |                 |          |
| B - Personal Property                                 | Yes                  | 3                | 10,165.00         |                 |          |
| C - Property Claimed as Exempt                        | Yes                  | 1                |                   |                 |          |
| D - Creditors Holding Secured<br>Claims               | Yes                  | 1                |                   | 80,882.28       |          |
| E - Creditors Holding Unsecured<br>Priority Claims    | Yes                  | 1                |                   | 0.00            |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims | Yes                  | 2                | ,                 | 11,754.17       |          |
| G - Executory Contracts and<br>Unexpired Leases       | Yes                  | 1                |                   |                 |          |
| H - Codebtors   | Yes                  | 1                |                   |                 |          |
| I - Current Income of Individual<br>Debtor(s)         | Yes                  | 1                |                   |                 | 2,599.00 |
| J - Current Expenditures of<br>Individual Debtor(s)   | Yes                  | 1                |                   |                 | 2,341.00 |
| Total Number of Sheets of ALL S                       | Schedules            | 13               |                   |                 |          |
|   | Т                    | otal Assets      | 95,165.00         |                 |          |
|   |                      |                  | Total Liabilities | 92,636.45       |          |

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| In re | Elnora Sanders | Case No. |  |
|-------|----------------|----------|--|
| ,     |                | Debtor   |  |

#### SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. (See Schedule D.) If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| 6405 South Lafl<br>Chicago, IL 606 |                                   |  | -   | 85,000.00   | 74,000.00                  |
|------------------------------------|-----------------------------------|--|---|---|----------------------------|
| Des                                | cription and Location of Property | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Market Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

Sub-Total > **85,000.00** (Total of this page)

Total > **85,000.00** 

#### Case 04-19990 Doc 1 Filed 05/21/04 Entered 05/21/04 14:50:18 Desc 2-Petition Page 5 of 30

| In re | Elnora Sanders |        | Case No. |  |
|-------|----------------|--------|----------|--|
| -     |                | Debtor |          |  |

#### SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

|    | Type of Property  | N O Description and Location of Proper E | Joint of                         | Current Market Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|----|---|--|----------------------------------|--|
| 1. | Cash on hand  | cash on hand                             | -                                | 20.00  |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | X  |                                  |  |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others.  | X  |                                  |  |
| 4. | Household goods and furnishings, including audio, video, and computer equipment.  | Miscellaneous furniture and furnishings  | •                                | 600.00   |
| 5. | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | Misc. books and pictures                 | -                                | 25.00  |
| 6. | Wearing apparel.  | X  |                                  |  |
| 7. | Furs and jewelry.   | X  |                                  |  |
| 8. | Firearms and sports, photographic, and other hobby equipment.   | X  |                                  |  |
| 9. | Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.  | X  |                                  |  |
|    |   |  | Sub-Tota<br>(Total of this page) | al > <b>645.00</b>   |

2 continuation sheets attached to the Schedule of Personal Property

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| In   | re Elnora Sanders   |                  |   | Case No.                                    |  |
|------|---|------------------|---|---|--|
|      |   | ·                | Debtor  |   |  |
|      |   | SCHE             | CDULE B. PERSONAL PROPER (Continuation Sheet) | <b>ATY</b>                                  |  |
|      | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property          | Husband,<br>Wife,<br>Joint, or<br>Community | Current Market Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 10.  | Annuities. Itemize and name each issuer.  | Х                |   |   |  |
| 11.  | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.  | Muti             | ual of Omaha                                  | -   | Unknown  |
| 12.  | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |   |   |  |
| 13.  | Interests in partnerships or joint ventures. Itemize.   | X                |   |   |  |
| 14.  | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | Х                |   |   |  |
| 15.  | Accounts receivable.  | X                |   |   |  |
| 16.  | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |   |   |  |
| 17.  | Other liquidated debts owing debtor including tax refunds. Give particulars.  | X                |   |   |  |
| 18.  | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property. | X                |   |   |  |
| 19.  | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |   |   |  |
|      |   |                  |   |   |  |
|      |   |                  | (*  | Sub-Tota<br>Total of this page)             | 1 > 0.00   |
| Shee | t 1 of 2 continuation sheets  | attached         |   |   |  |

to the Schedule of Personal Property

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|      |  |                  |  | . No  |  |
|------|--|------------------|--|---|--|
| In r | re Elnora Sanders  |                  | Debtor Case                                      | e No  |  |
|      |  | CCII             | EDULE B. PERSONAL PROPERTY                       | -   |  |
|      |  | SCH              | (Continuation Sheet)                             |   |  |
|      | Type of Property   | N<br>O<br>N<br>E | Description and Location of Property             | Husband,<br>Wife,<br>Joint, or<br>Community | Current Market Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|      | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | х                |  |   |  |
|      | Patents, copyrights, and other intellectual property. Give particulars.  | x                |  |   |  |
|      | Licenses, franchises, and other general intangibles. Give particulars:   | X                |  |   |  |
| 23.  | Automobiles, trucks, trailers, and other vehicles and accessories.   |                  | 95 Honda Accord (164K miles)<br>95 Jeep Cherokee | <i>-</i><br>-                               | 3,500.00<br>6,020.00   |
| 24.  | Boats, motors, and accessories.  | Х                |  |   |  |
| 25.  | Aircraft and accessories.  | X                |  |   |  |
| 26.  | Office equipment, furnishings, and supplies.   | X                |  |   |  |
| 27.  | Machinery, fixtures, equipment, and supplies used in business.   | X                |  |   |  |
| 28.  | Inventory.   | X                |  |   |  |
| 29.  | Animals.   | X                |  |   |  |
| 30.  | Crops - growing or harvested. Give particulars.  | X                |  |   |  |
| 31.  | Farming equipment and implements.  | X                |  |   |  |
| 32.  | Farm supplies, chemicals, and feed.  | X                |  |   |  |
| 33.  | Other personal property of any kind not already listed.  | Х                |  |   |  |

Sub-Total > (Total of this page)

9,520.00

Total >

10,165.00

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

| In re | Elnora Sanders | Case No. |
|-------|----------------|----------|
| -     |                | Debtor   |

## SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

[Check one box]

☐ 11 U.S.C. §522(b)(1): ☐ 11 U.S.C. §522(b)(2): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states. Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day

period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest

is exempt from process under applicable nonbankruptcy law.

| Description of Property  | Specify Law Providing Each Exemption           | Value of<br>Claimed<br>Exemption | Current Market Value of<br>Property Without<br>Deducting Exemption |
|--|--|----------------------------------|--|
| Cash on Hand<br>cash on hand   | 735 ILCS 5/12-1001(b)                          | 20.00                            | 20.00  |
| <u>Household Goods and Furnishings</u><br>Miscellaneous furniture and furnishings          | 735 ILCS 5/12-1001(b)                          | 600.00                           | 600.00   |
| Books, Pictures and Other Art Objects; Collectibles Misc. books and pictures               | <sup>S</sup> 735 ILCS 5/12-1001(a)             | 25.00                            | 25.00  |
| Interests in IRA, ERISA, Keogh, or Other Pension of Mutual of Omaha                        | or Profit Sharing Plans<br>735 ILCS 5/12-704   | 0.00                             | Unknown  |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u><br>1995 Honda Accord (164K miles) | 735 ILCS 5/12-1001(c)<br>735 ILCS 5/12-1001(b) | 1,200.00<br>1,380.00             | 3,500.00   |

<sup>0</sup> continuation sheets attached to Schedule of Property Claimed as Exempt

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| In re | Elnora Sanders | Case No | <del></del> |
|-------|----------------|---------|-------------|
| •     |                | Debtor  |             |

## SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Contingent."

"Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. dita Calandala D

| CREDITOR'S NAME AND MAILING<br>ADDRESS, INCLUDING ZIP CODE      | CODEBTOR | H W J C | Sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND MARKET VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTINGE      | QU LD            | 0186010 | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION IF<br>ANY |
|---|----------|---------|---|---------------|------------------|---------|--|--------------------------------|
| Account No. 006247461   | +        | T       | SUBJECT TO LIEN  1st Mortgage   | 7             | A<br>T<br>E<br>D |         |  | -                              |
| Countrywide Home Loans<br>PO box 5170<br>Simi Valley, CA 93093  |          | -       | 6405 South Laflin<br>Chicago, IL 60636  |               |                  |         |  |                                |
|   |          |         | Value \$ 85,000.00  | $\perp$       |                  | _       | 59,000.00  | 0.00                           |
| Account No.   |          |         | Secured Auto Loan   |               |                  |         |  |                                |
| Great Bank Algonquin<br>234 Randall Road<br>Algonquin, IL 60102 |          | _       | 1995 Jeep Cherokee  |               |                  |         |  |                                |
|   |          |         | Value \$ 6,020.00   | _             | L                |         | 6,882.28   | 862.28                         |
| Account No.   |          |         | 2nd Mortgage  |               |                  |         |  |                                |
| LaSalle Bank<br>135 South LaSalle Street<br>Chicago, IL 60674   |          | -       | 6405 South Laflin<br>Chicago, IL 60636  |               |                  | !       |  |                                |
|   | İ        |         | Value \$ 85,000.00  |               |                  |         | 15,000.00  | 0.00                           |
| Account No.   |          |         |   |               |                  |         |  |                                |
|   | -        |         | Value \$  | -             |                  |         |  |                                |
| 0 continuation sheets attached                                  |          |         | (Total c  | Sul<br>f this |                  |         | 80,882.28  |                                |
|   |          |         | (Report on Summary of   |               | Tot<br>du!       |         | 80,882.28  |                                |

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| In re      | Elnora Sanders  | Case No   |
|------------|---|---|
| , iii 10   |   | Debtor  |
|            | SCHEDULE E. CREDITORS HOLDIN  | NG UNSECURED PRIORITY CLAIMS  |
| uns<br>add | secured claims entitled to priority should be listed in this schedule.  | ype of priority, is to be set forth on the sheets provided. Only holders of In the boxes provided on the attached sheets, state the name and mailing holding priority claims against the debtor or the property of the debtor, a      |
| on t       | the appropriate schedule of creditors, and complete Schedule H - Coo  | on a claim, place an "X" in the column labeled "Codebtor," include the entity lebtors. If a joint petition is filed, state whether husband, wife, both of them a "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, o |
| "Un        | If the claim is contingent, place an "X" in the column labeled "Contiquidated." If the claim is disputed, place an "X" in the column labeled columns.)  | ntingent." If the claim is unliquidated, place an "X" in the column labeled eled "Disputed." (You may need to place an "X" in more than one of these  |
| E ir       | Report the total of claims listed on each sheet in the box labeled "Son the box labeled "Total" on the last sheet of the completed schedu   | abtotal" on each sheet. Report the total of all claims listed on this Schedule. Repeat this total also on the Summary of Schedules.   |
| •          | Check this box if debtor has no creditors holding unsecured priority  | claims to report on this Schedule E.  |
| TY         | PES OF PRIORITY CLAIMS (Check the appropriate box(es) bel   | ow if claims in that category are listed on the attached sheets.)   |
|            | Extensions of credit in an involuntary case   |   |
| the        | Claims arising in the ordinary course of the debtor's business or fin appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)  | ancial affairs after the commencement of the case but before the earlier of 2).   |
|            | Wages, salaries, and commissions  |   |
| inde       | Wages, salaries, and commissions, including vacation, severance, are pendent sales representatives up to \$4,650* per person earned with station of business, which ever occurred first, to the extent provided | d sick leave pay owing to employees and commissions owing to qualifying in 90 days immediately preceding the filing of the original petition, or the in 11 U.S.C. § 507 (a)(3).   |
|            | Contributions to employee benefit plans   |   |
| cess       | Money owed to employee benefit plans for services rendered within sation of business, whichever occurred first, to the extent provided  | n 180 days immediately preceding the filing of the original petition, or the in 11 U.S.C. § 507(a)(4).  |
| _          | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,650* per farmer  | or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).   |
| 1          | Deposits by individuals  Claims of individuals up to \$2,100* for deposits for the purchase, let were not delivered or provided. 11 U.S.C. § 507(a)(6).   | ase, or rental of property or services for personal, family, or household use,  |
|            | Alimony, Maintenance, or Support Claims of a spouse, former spouse, or child of the debtor for alimony  | maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).   |
|            | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and loc  | cal governmental units as set forth in 11 U.S.C § 507(a)(8).  |
|            | Commitments to Maintain the Capital of an Insured Depository  |   |

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

0 continuation sheets attached

\*Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of

adjustment.

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| In re | Elnora Sanders | Case No. |  |
|-------|----------------|----------|--|
|       |                | Debtor   |  |

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

|  | Ç                                    | Hu          | sband, Wife, Joint, or Community  |          | S       | ΙV          | l P      |                 |
|--|--------------------------------------|-------------|---|----------|---------|-------------|----------|-----------------|
| CREDITOR'S NAME AND MAILING<br>ADDRESS INCLUDING ZIP CODE                            | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | C<br>A<br>H | DATE CLAIM WAS INCURRED AN<br>CONSIDERATION FOR CLAIM. IF CL<br>IS SUBJECT TO SETOFF, SO STAT | AIM      | NHLNGEN | LIQUIDA     | E        | AMOUNT OF CLAIM |
| Account No. 4319-0410-0866-1045  |                                      |             | Credit card purchases   |          | Ť       | T<br>E<br>D |          |                 |
| Bank of America<br>PO Box 5270<br>Carol Stream, IL 60197-5270                        |                                      | -           |   |          |         |             |          |                 |
| Account No. 4862-3623-5656-1145  |                                      |             | Credit Card Use   |          |         |             |          | 1,419.00        |
| Capital One<br>Remittance Processing<br>P.O. Box 60000<br>Seattle, WA 98190-6000     |                                      | -           |   |          |         |             |          | 281.00          |
| Account No. 10-6860-018-1  |                                      |             | Credit card purchases   |          |         |             |          |                 |
| Carson Pirie Scott<br>PO Box 17633<br>Baltimore, MD 21297-1633                       |                                      | -           |   |          | į       |             |          |                 |
| 7004   |                                      |             | Credit card purchases   |          | _       | +           | <u> </u> | 846.88          |
| Account No. 6011-0076-3021-5621  Discover PO Box 30395 Salt Lake City, UT 84130-0395 |                                      | •           | Greuit Card purchases   |          |         |             |          | 4,269.00        |
| 1 continuation sheets attached   |                                      |             | 1   | Total of |         | otot<br>pa  |          | 6,815.88        |

|       | •              |        |         |
|-------|----------------|--------|---------|
| In re | Elnora Sanders |        | Case No |
|       |                | Debtor |         |

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

|   | C                    | Hu       | sband, Wife, Joint, or Community                             | CO           | N        | l<br>I   | 7            |                 |
|---|----------------------|----------|--|--------------|----------|----------|--------------|-----------------|
| CREDITOR'S NAME AND MAILING<br>ADDRESS INCLUDING ZIP CODE                     | CODEBTOR             | С<br>Н М | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM | 24-2682      | L-QU-DAT | S        | j<br>I       | AMOUNT OF CLAIM |
| Account No. 373-389-848-4   | Г                    |          | Consumer Debt  | 7            | E<br>D   |          |              |                 |
| JC Penney<br>PO Box 960001<br>Orlando, FL 32896-0001                          |                      | -        |  |              | D        |          |              | 1,997.00        |
| Account No. F14836829   | <u> </u>             |          | Re: Silver Cross Hospital                                    |              | T        | Γ        | T            |                 |
| KCA Financial Services<br>628 N. Street<br>Geneva, IL 60134                   |                      | -        |  |              |          |          | :            |                 |
|   |                      |          |  |              |          |          | $\perp$      | 600.00          |
| Account No. 028151  |                      |          | Medical Expense  |              |          |          |              |                 |
| Parkview Orthopedic Group<br>7600 West College Dr.<br>Palos Heights, IL 60463 |                      | -        |  |              |          |          |              | 1,000.00        |
| Account No. <b>06-53944-81690-5</b>   |                      | <u> </u> |  | +            | ┢        | <u> </u> | +            | 7,000.00        |
| Sears Charge Plus<br>P.O. Box 182149<br>Columbus, OH 43218                    |                      | -        |  |              |          |          |              | 705 50          |
|   | L                    | L        |  | $\downarrow$ |          | L        | $\downarrow$ | 795.59          |
| Account No. 01-74038-539113   |                      |          | Credit card purchases  |              |          |          |              |                 |
| Sears Premier Card<br>Payment Center<br>P.O. Box 182149                       |                      | -        |  |              |          |          |              |                 |
| Columbus, OH 43218-2149   |                      |          |  |              |          |          |              | 1,495.70        |
| Sheet no1_ of _1 sheets attached to Schedule of                               | Subtotal             |          |  |              |          |          | $\dagger$    |                 |
| Creditors Holding Unsecured Nonpriority Claims                                | (Total of this page) |          |  |              |          |          | , L          | 5,888.29        |
| · · · · · · · · · · · · · · · · · · ·   |                      |          | (Report on Summary of S                                      |              | Fota     |          | $\int$       | 12,704.17       |
|   |                      |          | (Keport on Summary or S                                      | 0110         |          | )        | ′ L          |                 |

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| In re   | Elnora Sanders   | Case No.   |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|
|   |  | Debtor   |  |  |  |  |  |  |  |
|   | SCHEDULE G. EXECUTORY C  | ONTRACTS AND UNEXPIRED LEASES  |  |  |  |  |  |  |  |
|   | Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. |  |  |  |  |  |  |  |  |
| NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in t schedule of creditors. |  |  |  |  |  |  |  |  |  |
| ■ Check this box if debtor has no executory contracts or unexpired leases.  |  |  |  |  |  |  |  |  |  |
|   | Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract  | Description of Contract or Lease and Nature of Debtor's Interest.  State whether lease is for nonresidential real property.  State contract number of any government contract. |  |  |  |  |  |  |  |

<sup>0</sup> continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

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| In re                  | Elnora Sanders   | Case No.                     |  |  |  |  |  |
|------------------------|--|------------------------------|--|--|--|--|--|
|                        |  | Debtor                       |  |  |  |  |  |
|                        | SCHE   | DULE H. CODEBTORS            |  |  |  |  |  |
| debto<br>repoi<br>immo | Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by or in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should at the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years ediately preceding the commencement of this case.  Therefore, this box if debtor has no codebtors. |                              |  |  |  |  |  |
|                        |  |                              |  |  |  |  |  |
|                        | NAME AND ADDRESS OF CODEBTOR   | NAME AND ADDRESS OF CREDITOR |  |  |  |  |  |

\_\_\_ continuation sheets attached to Schedule of Codebtors

| In re | Elnora Sanders | Case No. |
|-------|----------------|----------|
| _     |                | Debtor   |

## SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

|                            | on is filed, unless the spouses are separated and a joint petr |                      |                 |          |            |  |  |  |
|----------------------------|--|----------------------|-----------------|----------|------------|--|--|--|
| Debtor's Marital Status:   | DEPENDENTS OF DEB  |                      |                 |          |            |  |  |  |
|                            | NAMES  | AGE                  | RELATIC         | INSHIP   |            |  |  |  |
|                            | None.  | ļ                    |                 |          |            |  |  |  |
|                            |  |                      |                 |          |            |  |  |  |
|                            |  |                      |                 |          |            |  |  |  |
|                            |  |                      |                 |          |            |  |  |  |
|                            |  |                      |                 |          |            |  |  |  |
| EMPLOYMENT:                | DEBTOR   |                      | LSPOUS          | Е        |            |  |  |  |
| Occupation                 |  |                      |                 |          |            |  |  |  |
| Name of Employer           |  |                      |                 |          |            |  |  |  |
| How long employed          |  |                      |                 |          |            |  |  |  |
| Address of Employer        |  |                      |                 |          |            |  |  |  |
| 1 ,                        |  |                      |                 |          |            |  |  |  |
|                            |  |                      |                 |          |            |  |  |  |
| DICOMP (Fithersteen)       | average monthly income)  | D                    | EBTOR           | SI       | POUSE      |  |  |  |
| INCOME: (Estimate of       | ges, salary, and commissions (pro rate if not paid monthl      |                      | 0.00            | \$       | N/A        |  |  |  |
|                            | ne   | \$) \$ <u></u><br>\$ | 0.00            | \$       | N/A        |  |  |  |
|                            |  | \$                   | 0.00            | \$       | N/A        |  |  |  |
|                            |  | Ψ                    | - 0.00          |          |            |  |  |  |
| LESS PAYROLL DE            |  | \$                   | 0.00            | \$       | N/A        |  |  |  |
|                            | ocial security   | \$                   | 0.00            | \$       | N/A        |  |  |  |
|                            |  | \$<br>\$             | 0.00            | \$       | N/A        |  |  |  |
|                            |  | \$<br>\$             | 0.00            | \$       | N/A        |  |  |  |
| d. Other (Specify)         |  | <u>\$</u>            | 0.00            | \$       | N/A        |  |  |  |
| SUBTOTAL OF PAY            | ROLL DEDUCTIONS  | \$                   | 0.00            | \$       | N/A        |  |  |  |
| TOTAL NET MONTHLY          | TAKE HOME PAY  | \$                   | 0.00            | \$       | N/A        |  |  |  |
| Regular income from ope    | ration of business or profession or farm (attach detailed      |                      |                 |          |            |  |  |  |
| statement)                 |  | \$                   | 0.00            | \$       | N/A        |  |  |  |
|                            | /  | \$                   | 0.00            | \$       | N/A        |  |  |  |
| Interest and dividends     |  | \$                   | 0.00            | \$       | N/A        |  |  |  |
| Alimony, maintenance or    | support payments payable to the debtor for the debtor's u      | ise                  | 0.00            | ¢        | N/A        |  |  |  |
|                            | ed above   | \$                   | 0.00            | Φ        | 10/7       |  |  |  |
| Social security or other g |  | \$                   | 0.00            | \$       | N/A        |  |  |  |
| (Specify)                  |  | \$<br>\$             | 0.00            | \$       | N/A        |  |  |  |
| Pension or retirement inco | ome  | \$                   | 1,699.00        | \$       | N/A        |  |  |  |
| Other monthly income       |  |                      |                 |          |            |  |  |  |
| (Specify) contribution f   |  | \$                   | 700.00          | \$       | N/A        |  |  |  |
| Contribution               | from daughter  | \$                   | 200.00          | <u>ъ</u> | N/A        |  |  |  |
| TOTAL MONTHLY INC          | OME  | \$                   | 2,599.00        | <u> </u> | N/A        |  |  |  |
| TOTAL COMBINED MO          | ONTHLY INCOME \$ <u>2,599.00</u>                               | (Rep                 | oort also on Su | mmary of | Schedules) |  |  |  |

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

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| e Elnora Sanders  |                   |                | Debtor      | , cas               | se No                                 |   |
|---|-------------------|----------------|-------------|---------------------|---------------------------------------|---|
|   |                   |                | Dedior      |                     |                                       |   |
| SCHEDULE J. C   | URRENT E          | XPENDI         | TURES       | OF INDIVID          | UAL DEBT                              | OR(S)                                   |
| Complete this schedule by estimate bi-weekly, quarterly, semi-ann       | _                 |                |             |                     | e debtor's family                     | . Pro rate any pa                       |
| Check this box if a joint petitic expenditures labeled "Spouse."        | on is filed and o | debtor's spou  | se maintair | ns a separate house | ehold. Complete                       | a separate sche                         |
| Rent or home mortgage payment (i  | nelude lot rente  | ed for mobile  | home)       |                     |                                       | 750.00                                  |
| Are real estate taxes included?   |                   | No             |             |                     |                                       |   |
| Is property insurance included?   |                   | No             |             |                     |                                       |   |
| Utilities: Electricity and heating fu                                   |                   |                |             |                     | \$_                                   | 28.00                                   |
| Water and sewer   |                   |                |             |                     |                                       | 0.00                                    |
| Telephone   |                   |                |             |                     | \$_                                   | 50.00                                   |
| Other   |                   |                |             |                     | \$ <u> </u>                           | 0.00                                    |
| Home maintenance (repairs and upl                                       | keep)             |                |             |                     | \$                                    | 0.00                                    |
| Food  |                   |                |             |                     | \$                                    | 230.00                                  |
| Clothing  |                   |                |             |                     |                                       |   |
| Laundry and dry cleaning  |                   |                |             |                     |                                       |   |
| Medical and dental expenses   |                   |                |             |                     | \$_                                   | 30.00                                   |
| Transportation (not including car pa                                    | ayments)          |                |             |                     | \$_                                   | 180.00                                  |
| Recreation, clubs and entertainment                                     | t, newspapers, r  | nagazines, et  | c           |                     | \$_                                   | 0.00                                    |
| Charitable contributions  |                   |                |             |                     | \$ <u> </u>                           | 0.00                                    |
| Insurance (not deducted from wage                                       |                   |                |             |                     | Ф                                     |   |
| Homeowner's or renter's .   |                   |                |             |                     |                                       |   |
| Health  |                   |                |             |                     |                                       |   |
| Auto  |                   |                |             |                     |                                       | 0.00                                    |
| Other   |                   |                |             |                     | \$ <u> </u>                           | 0.00                                    |
| Taxes (not deducted from wages or (Specify)                             | included in ho    | me mortgage    | payments)   |                     | \$                                    | 0.00                                    |
| Installment payments: (In chapter 1                                     | 2 and 13 cases.   | do not list i  | oavments to |                     | · · · · · · · · · · · · · · · · · · · |   |
| Auto  |                   |                |             |                     |                                       | 113.00                                  |
| Other   |                   |                |             |                     | <b>\$_</b>                            | 0.00                                    |
| Other   |                   |                |             |                     | \$ <u> </u>                           | 0.00<br>0.00                            |
| Other   |                   |                |             |                     |                                       | 0.00                                    |
| Alimony, maintenance, and support<br>Payments for support of additional |                   |                |             |                     |                                       |   |
| Regular expenses from operation of                                      |                   |                |             |                     |                                       |   |
| 2 .   |                   |                |             |                     |                                       |   |
| Other 1st mortgage on hom   |                   |                |             |                     |                                       | 200.00                                  |
| Other 2nd mortgage on hon TOTAL MONTHLY EXPENSES (                      |                   |                |             |                     |                                       | 2,341.00                                |
|   |                   | Summary of     | Schedules)  |                     |                                       |   |
| FOR CHAPTER 12 AND 13 DEBT  |                   |                |             |                     | 1.1                                   | . 11                                    |
| 3 1.1 (b) 1.1 Commendate magnification by                               | -low including    | whether plan   | n payments  | are to be made bi   | -weekly, monthl                       | y, annually, or a                       |
| Provide the information requested be other regular interval.            | cion, morading    | Wiletiner plan | - F 7       |                     |                                       | • |

(interval)

258.00 258.00

D. Total amount to be paid into plan each \_\_\_\_\_Monthly

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### United States Bankruptcy Court Northern District of Illinois

| In re | Elnora Sanders |           | Case No. |    |
|-------|----------------|-----------|----------|----|
|       |                | Debtor(s) | Chapter  | 13 |
|       |                | • • •     | •        |    |

#### **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <a href="mailto:sheets">14</a> sheets [total shown on summary page plus 1], and that they are true and correct to the best of my knowledge, information, and belief.

Date <u>5/17/04</u>

Signature

Elnora Sanders

Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

18 U.S.C. §§ 152 and 3571.

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## United States Bankruptcy Court Northern District of Illinois

| In re               | Elnora Sand   | ers  |                          |  | Case No.                     |  |
|---------------------|---|--|--------------------------|--|------------------------------|--|
|                     |   |  |                          | Debtor(s)  | Chapter                      | 13   |
|                     | DI  | SCLOSURE (   | OF COMPENSA              | ATION OF ATTOR   | NEY FOR DE                   | EBTOR(S)   |
|                     | compensation paid   | to me within one y   | ear before the filing of | 016(b), I certify that I am the petition in bankruptcy, in connection with the bank              | or agreed to be pai          | the above-named debtor and that<br>id to me, for services rendered or to<br>llows: |
|                     |   | ices, I have agreed to   |                          |  | \$                           | 2,700.00   |
|                     | Prior to the fil  | ing of this statemen   | t I have received        |  | \$                           | 200.00   |
|                     | Balance Due   |  |                          |  | \$                           | 2,500.00   |
| 2. 7                | The source of the c   | ompensation paid to  | me was:                  |  |                              |  |
|                     |   | Debtor   |                          | Other (specify):   |                              |  |
| 3. 7                | The source of comp  | pensation to be paid   | to me is:                |  |                              |  |
|                     |   | Debtor   |                          | Other (specify):   |                              |  |
| 5. I<br>8<br>1<br>0 | I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. |  |                          |  |                              |  |
| 5. I                | Represei  | the debtor(s), the ab<br>ntation of the de<br>r adversary proc | btors in any discha      | s not include the following s<br>rgeability actions, judic                                       | ervice:<br>ial lien avoldand | ces, relief from stay actions or   |
|                     | ankruptcy proceed   |  |                          | Debra J. Vornies L MGM Law Offices, 180 N. LaSalle Suite 3014 Chicago, IL 60601 866-795-1903 Fax | evine<br>LLC                 | r representation of the debtor(s) in   |

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Form 7 (9/00)

### United States Bankruptcy Court Northern District of Illinois

| In re         Elnora Sanders         Case No.           Debtor(s)         Chapter         13 |
|--|
|--|

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE (if more than one)
\$8,029.00 2003 income
\$33,812.00 2002 income
\$7,605.00 2004 YTD

## 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE 2003 unemployment

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#### 3. Payments to creditors

None

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL **OWING** 

2

b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

DATE OF PAYMENT

AMOUNT STILL

RELATIONSHIP TO DEBTOR

AMOUNT PAID

**OWING** 

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

STATUS OR DISPOSITION

filed.)

AND LOCATION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY

OF CUSTODIAN

7. Gifts

None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

3

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE MGM Law Office 180 N. LaSalle Suite 3014 Chicago, IL 60601 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 2004 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$200 toward attorney fees
\$194 filing fee

#### 10. Other transfers

None

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

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#### 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year

immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

4

#### 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the

commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

\_

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### NAME AND ADDRESS OF OWNER

#### 15. Prior address of debtor

None If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor

occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** 

NAME USED

DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

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None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

5

**GOVERNMENTAL UNIT** 

NOTICE

LAW

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT** 

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

TAXPAYER

I.D. NUMBER **ADDRESS**  **NATURE OF BUSINESS** 

BEGINNING AND ENDING

DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

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b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books None of account and records, or prepared a financial statement of the debtor.

DATES SERVICES RENDERED ADDRESS NAME

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records None of the debtor. If any of the books of account and records are not available, explain.

**ADDRESS** NAME

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was None issued within the two years immediately preceding the commencement of this case by the debtor.

20. Inventories

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, None

DATE ISSUED

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

NATURE AND PERCENTAGE

and the dollar amount and basis of each inventory.

INVENTORY SUPERVISOR DATE OF INVENTORY

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above. None

DATE OF INVENTORY

NAME AND ADDRESS

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership. None

NAME AND ADDRESS

NAME

NATURE OF INTEREST PERCENTAGE OF INTEREST

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, None controls, or holds 5 percent or more of the voting or equity securities of the corporation.

OF STOCK OWNERSHIP NAME AND ADDRESS TITLE

22. Former partners, officers, directors and shareholders

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the None commencement of this case.

DATE OF WITHDRAWAL **ADDRESS** 

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year None

immediately preceding the commencement of this case.

TITLE DATE OF TERMINATION NAME AND ADDRESS

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## 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the

commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 7

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| I declare under penalty of perjury that I have read the answ and that they are true and correct. | wers contained in the foregoing statement of financial affairs and any attachments theret |
|--|---|
| Date   | Signature   |

**Elnora Sanders** 

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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#### 25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER

7

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date <u>5 -11-04</u>

Signature

Elnora Sanders

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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# United States Bankruptcy Court Northern District of Illinois

| In re               | Elnora Sanders  |  |  | Case No.  |   |
|---------------------|---|--|--|---|---|
|                     |   |  | Debtor(s)  | Chapter   | 13  |
|                     | DISCLOSURE (  | OF COMPENSA  | ATION OF ATTOR   | NEY FOR DE  | EBTOR(S)  |
| (                   | Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one your rendered on behalf of the debtor(s)  | ear before the filing of   | f the petition in bankruptcy,  | or agreed to be pai   | d to me, for services rendered or to              |
|                     | For legal services, I have agreed t   | o accept   |  | \$  | 0.00  |
|                     | Prior to the filing of this statemen  | t I have received  |  | \$  | 0.00  |
|                     | Balance Due   |  |  | \$  | 0.00  |
| 2.                  | The source of the compensation paid to  | me was:  |  |   |   |
|                     | Debtor  |  | Other (specify):   |   |   |
| 3. 7                | The source of compensation to be paid   | to me is:  |  |   |   |
|                     | Debtor  |  | Other (specify):   |   |   |
| 5. I<br>a<br>t<br>c | A copy of the agreement, together  n return for the above-disclosed fee, I  Analysis of the debtor's financial si  Preparation and filing of any petitic  Representation of the debtor at the  [Other provisions as needed]  Negotiations with secure reaffirmation agreements 522(f)(2)(A) for avoidance | with a list of the names have agreed to render leading, and rendering on, schedules, statemen meeting of creditors an ed creditors to red and applications of liens on houseleave-disclosed fee does boove-disclosed fee does boove-disclosed fee does boove in any discha | s of the people sharing in the legal service for all aspects of advice to the debtor in detert of affairs and plan which not confirmation hearing, and uce to market value; e as needed; preparationald goods. | e compensation is all<br>of the bankruptcy ca<br>mining whether to that be required;<br>any adjourned hear<br>emption planning and filing of the<br>ervice: | ise, including:<br>Tile a petition in bankruptcy; |
|                     |   | CE   | ERTIFICATION   |   |   |
|                     | certify that the foregoing is a compleankruptcy proceeding.   | etc statement of any ag  | greement or arrangement for  | payment to me for   | representation of the debtor(s) in                |
| Dated               |   |  | Debra J. Vorhies L.<br>MGM Law Offices,<br>180 N. LaSalle<br>Suite 3014<br>Chicago, IL 60601<br>866-795-1903 Fax   | LLC   |   |

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## United States Bankruptcy Court Northern District of Illinois

| In re  | Elnora Sanders                                     | Case No.                                    |            |  |  |
|--------|--|---|------------|--|--|
|        |  | Debtor(s)                                   | Chapter 13 |  |  |
| Γhe ab | <b>VERIF</b> ove-named Debtor hereby verifies that | MATRIX  correct to the best of his/her know |            |  |  |
| Date:  | 5-17-04  | Chara Sam<br>Elnora Sanders                 | ders       |  |  |

Signature of Debtor

Bank of America PO Box 5270 Carol Stream, IL 60197-5270

Capital One Remittance Processing P.O. Box 60000 Seattle, WA 98190-6000

Carson Pirie Scott PO Box 17633 Baltimore, MD 21297-1633

Countrywide Home Loans PO box 5170 Simi Valley, CA 93093

Discover PO Box 30395 Salt Lake City, UT 84130-0395

Great Bank Algonquin 234 Randall Road Algonquin, IL 60102

JC Penney PO Box 960001 Orlando, FL 32896-0001

KCA Financial Services 628 N. Street Geneva, IL 60134

LaSalle Bank 135 South LaSalle Street Chicago, IL 60674

Parkview Orthopedic Group 7600 West College Dr. Palos Heights, IL 60463

Sears Charge Plus P.O. Box 182149 Columbus, OH 43218 Sears Premier Card Payment Center P.O. Box 182149 Columbus, OH 43218-2149